



POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/697,584
	Filing Date	October 29, 2003
	First Named Inventor	Theodore M. KHALILI
	Title	ROBOTIC SURGICAL DEVICE
	Art Unit	3739
	Examiner Name	Not Yet Assigned
	Attorney Docket No.	203782000400

I hereby appoint:

☒ Practitioners at Customer Number
OR
☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Peter E. Braveman, Senior Vice President for Legal Affairs & General Counsel
Signature	
Date	3/11/04
Telephone	(310) 423-5000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.